CPA# 2835

CONTINUED PROSECUTION APPLICATION (CPA)
REQUEST TRANSMITTAL
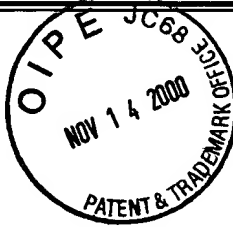(Only for Continuation or Divisional applications under 37 CFR 1.53(d))

#12
11/27/00
Haye

Check Box, if applicable:
[ ] DUPLICATE

Address to:		
Director of Patents and Trademarks BOX CPA Washington, D.C. 20231	Attorney Docket No.	981331
	First Named Inventor	Masuo OHNISHI et al.
	Express Mail Label No.	
	Total Pages	

OIPE JC68 NOV 14 2000 PATENT & TRADEMARK OFFICE

This is a request for a [X] continuation or [] divisional application under 37 CFR 1.53(d) (continued prosecution application or CPA) of prior application number ___09___ / ___184,878_____ , filed on ___November 3, 1998_____ ,

entitled ___ELECTRONIC APPARATUS AND DISK UNIT MOUNTING MECHANISM_____ .

1. [X] Enter the unentered amendment previously filed on _September 29, 2000_____
     under 37 CFR 1.116 in the prior nonprovisional application.

2. [] A Preliminary Amendment is enclosed.

3. This Application is filed by fewer than all the inventors named in the prior application, 37 CFR 1.53 (d)(4).

     a. [] DELETE the following inventor(s) named in the prior nonprovisional application:

     _____

     _____

     b. [] The inventor(s) to be deleted are set forth on a separate sheet attached hereto.

4. [ ] A new power of attorney or authorization of agent (PTO/SB/81) is enclosed.

5. [ ] Information Disclosure Statement (IDS) is enclosed:

     a. [] PTO-1449

     b. [] Copies of IDS Citations

11/15/2000 EHAMMOND 00000022 09184878
01 FC:131   710.00 OP
02 FC:102   1040.00 OP
03 FC:103   648.00 OP
04 FC:104   270.00 OP

Fee Transmittal The filing fee is calculated below	Number Filed	Number Extra	Rate	Basic Fee $710.00
Total Claims	56 - 20	36	x $18.00	648.00
Independent Claims	16- 3	13	x $80.00	1040.00
Multiple Dependent Claims			$270.00	270.00
			Basic Filing Fee	2668.00
Reduction by ½ for small entity				
TOTAL				2668.00

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6. Small entity status:

   a. [] A small entity statement is enclosed.

   b. [] A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.

   c. [] Is no longer claimed.

7. [] Please charge our Deposit Account No. **01-2340** in the total amount of _. A duplicate of this sheet is attached.

   [X] The Commissioner is hereby authorized to charge payment for any additional filing fees required under 37 CFR 1.16, or fees for an Extension of Time under 37 C.F.R. 1.17, or credit any overpayment to Deposit Account No. **01-2340**. A duplicate of this sheet is attached.

8. [X] A check in the amount of __$2,668.00__ is enclosed. This check includes $_710.00_ basic filing fee, $648.00 additional claims over 20, $1040.00 additional independent claims over 3, and $270.00 for filing of multiple dependent claims.

9. [] Other _____

10. CORRESPONDENCE ADDRESS

23850
PATENT TRADEMARK OFFICE

11. SUBMITTED BY	
Typed or Printed Name William L. Brooks	Reg. No. 34,129
Signature *William L. Brooks*	Date: November 14, 2000

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 1997

CLAIMS AS AMENDED - PART II

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
AMENDMENT	Total	30	Minus	* 20	=	x 9 =		OR	x 18 =	180
	Independent	16	Minus	*** 3	= 13	x 39 =		OR	40	1040
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+130 =		OR	+260 =	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
AMENDMENT	Total	*	Minus	**	=	x 9 =		OR	x 18 =	
	Independent	*	Minus	***	=	x 39 =		OR	x 78 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+130 =		OR	+260 =	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
AMENDMENT	Total	*	Minus	**	=	x$ 9 =		OR	x 18 =	
	Independent	*	Minus	***	=	x 39 =		OR	x 78 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+130 =		OR	+260 =	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
AMENDMENT	Total	*	Minus	**	=	x$ 9 =		OR	x$ 18 =	
	Independent	*	Minus	***	=	x 39 =		OR	x 78 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+130 =		OR	+260 =	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.